| PATENT APPLICATION FEE DETERMINATION REC<br>Effective October 1, 2004   |  |   |   |   |                    |                          |                     | ORD                 | Application or Docket Number 10/5/6859 |                            |                     |                        |
|---|--|---|---|---|--------------------|--------------------------|---------------------|---------------------|--|----------------------------|---------------------|------------------------|
| CLAIMS AS FILED - PART I (Column 1) (Column 2)  |  |   |   |   |                    |                          |                     | SMALL ENTITY TYPE   |  | OTHER THAN OR SMALL ENTITY |                     |                        |
| TOTAL CLAIMS  |  |   | (Leicher I)                             |   |                    | oudin 2)                 |                     | RATE                | FEE                                    |                            | RATE                | FEE                    |
| FOR   |  |   | NUMBER F                                | ILED  | NUM                | IBER EXTRA               |                     | BASIC FEE           |  | OR                         | BASIC FEE           | 750                    |
| TOTAL CHARGEABLE CLAIMS   |  |   | 1/1 mi                                  | nus 20 =                                    |                    |                          |                     | X \$ 9 =            |  | OR                         | X \$ 18 =           | 100                    |
| INDEPENDENT CLAIMS  |  |   | 7 minus 3 = .                           |   |                    |                          |                     |                     |  |                            |                     |                        |
| MULTIPLE DEPENDENT CLAIM PR   |  |   |   |   |                    |                          |                     | X \$ 44 =           |  | OR                         | X \$ 88 =           |                        |
|   |  |   |   |   |                    |                          |                     | + \$ 150 =          |  | OR                         | + \$ 300 =          | 0.00                   |
| * If the difference in column 1 is less than zero, enter "0" in column 2  |  |   |   |   |                    |                          |                     | TOTAL               |  | OR                         | TOTAL               | 750                    |
| Column 1)   |  |   | AMENDED - PART II (Column 2) (Column 3) |   |                    |                          |                     | SMALL               | ENTITY                                 | OR                         | OTHER<br>SMALL      |                        |
| AMENDMENT A   | •  | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |   | HIGHI<br>NUME<br>PREVIO<br>PAID I           | BER<br>BUSLY       | PRESENT<br>EXTRA         |                     | RATE                | ADDI-<br>TIONAL<br>FEE                 |                            | RATE                | ADDI-<br>TIONAL<br>FEE |
|   | Total  | · 17                                      | Minus                                   | 1   | 1                  | = /                      |                     | X \$ 9 =            | 1                                      | OR                         | X \$ 18 =           | 1                      |
|   | Independent                                    | . 5                                       | Minus                                   | <del></del> 3                               |                    | =                        |                     | X \$ 44 =           | 1                                      | OR                         | X \$ 88 =           |                        |
|   | FIRST PRESE                                    | NTATION OF I                              | MULTIPLE DEP                            | ENDENT                                      | CLAIM              |                          |                     | + \$ 150 =          |  | OR                         | + \$ 300 =          |                        |
| 1   |  |   |   |   |                    |                          |                     | TOTAL<br>ADDIT, FEE |  | OR                         | TOTAL<br>ADDIT, FEE | <del>-  </del>         |
|   |  | (Column 1)                                |   | ADDIT: TEE                                  |                    | ,                        | ADDO: FEE           |                     |  |                            |                     |                        |
| AMENDMENT B   |  | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |   | HIGHI<br>NUME<br>PREVIO<br>PAID I           | BER<br>USLY        | PRESENT<br>EXTRA         |                     | RATE                | ADDI-<br>TIONAL<br>FEE                 |                            | RATE                | ADDI-<br>TIONAL<br>FEE |
|   | Total  | •   | Minus                                   | •• .  |                    | =                        |                     | X \$ 9 =            |  | OR                         | X \$ 18 =           |                        |
|   | Independent                                    | *   | Minus                                   | 4+4   |                    | =                        |                     | X \$ 44 =           |  | OR                         | X \$ 88 =           | -                      |
|   | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM |   |   |   |                    |                          |                     | + \$ 150 =          |  | OR                         | + \$ 300 =          |                        |
|   |  | (Column 1)                                |   | TOTAL<br>ADDIT. FEE                         |                    | OR                       | TOTAL<br>ADDIT. FEE |                     |  |                            |                     |                        |
| AMENDMENT C   |  | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |   | (Colum<br>HIGHE<br>NUME<br>PREVIO<br>PAID F | EST<br>BER<br>USLY | (Column 3) PRESENT EXTRA |                     | RATE                | ADDI-<br>TIONAL<br>FEE                 |                            | RATE                | ADDI-<br>TIONAL<br>FEE |
|   | Total  | *   | Minus                                   | **  |                    | <b>a</b>                 |                     | X \$ 9 =            |  | OR                         | X \$ 18 =           |                        |
|   | Independent                                    | •   | Minus                                   | ***   |                    | =                        |                     | X \$ 44 =           |  | OR                         | X \$ 88 =           |                        |
| - 1   | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM |   |   |   |                    |                          |                     | + \$ 150 =          |  | OR                         | + \$ 300 =          |                        |
| <del></del>   |  |   |   |   |                    |                          |                     | TOTAL<br>ADDIT. FEE |  | OR                         | TOTAL<br>ADDIT. FEE |                        |
| * If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than "20", enter "20".  *** If the "Highest Number Previously Paid For" IN THIS SPACE is less than "3", enter "3".  The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1. |  |   |   |   |                    |                          |                     |                     |  |                            |                     |                        |

FORM PTO-875 (Rev. 11/2004)